

FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

☐ This is an **initial*** Statement of Organization

☒ This is an **amended*** Statement of Organization

* Statement must be filed within 10 days of committee accepting contributions, making expenditures, or incurring debts exceeding \$750. Amendments must be filed within 30 days of a change.
Effective January 1, 2011, ONLY county/local committees with less than \$2000 in campaign activity may file using these forms. All other committees must file their statements and reports electronically.

Reset Form

FORM

DR-1

(Rev. 8/2011)

STATEMENT

OF

ORGANIZATION

For Office Use Only

Comm. # 13832

Indexed

Audited

Computer

COMMITTEE NAME (A candidate's committee must include the candidate's last name in the name of the committee.) If amending committee name, put old name in (). (MOORE FOR CITY COUNCIL)

MOORE FOR THE PEOPLE

IMPORTANT: Indicate type of committee you are reporting for: 6

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) Statewide PAC (3) State Party (4) County Central Committee
(5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC
(10) School Board or Other Political Subdivision PAC (11) Ballot Issue (including committee involved in multiple city/county ballot issues)

COMMITTEE TREASURER (mandatory for all committees)

Name KAREN A. SHOOPMAN
Mailing Address 3804 INDIANAPOLIS AVE.
City, State DES MOINES, IA Zip Code 50317
Phone (515) 266-1350
e-Mail

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name MARTY MAUK
Mailing Address 2701 ARTHUR AVE.
City, State DES MOINES, IA Zip Code 50317
Phone (515) 250-9201
e-Mail topomauk@mchsi.com

INDICATE PURPOSE OF COMMITTEE - Check One Box ☒ Advocate for/against candidate(s)

Comment or description:

All Candidates Enter:

Office Sought: CITY OF DES MOINES AT LARGE

Political Party (if applicable)

District:

Year Standing for Election: 2013

Bank Account Name (must match committee name)

MOORE FOR THE PEOPLE
Name of Financial Institution/type of Account COMMUNITY STATE BANK
Mailing Address 3540 E. 33RD STREET
City DES MOINES, IA State IA Zip 50317

County/Local Candidates and Ballot Issue Committees Enter:

County: POLK

(If active in multiple ballot issue elections, attach list of counties)

Date of Election: 11/05/13

Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor

SKIP MOORE
Mailing Address 3822 E. 28TH ST
City DES MOINES, IA State IA Zip 50317
Phone (515) 681-9804
e-Mail mooreforthepeople@yahoo.com

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.
2. That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.
3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.41 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule. A committee that wishes to register a committee name for purposes of using the shorter "paid for by" and does not intend to cross the \$750 filing threshold shall file the Form DR-SFA form in lieu of filing this form.
4. That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for ballot issue PACs.
5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.
6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

Karen A. Shoopman
Signature of Treasurer
Skip Moore
Signature of Candidate, OR, for all other committees, Chairperson

7/19/13
7-19-13

Date Signed

Date Signed